

CLAIMS ONLY						Application Number 10-773900		Filing Date			
						Applicant(s)					
						* May be used for additional claims or amendments					
CLAIMS			AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
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Total Indep	5		2								
Total Depend	29		20								
Total Claims	34		22								